

# KENTUCKY IMMUNIZATION PROGRAM

## CELSIUS TEMPERATURE LOG

MONTH/YEAR: \_\_\_\_\_

DAYS 16-31

REFRIGERATOR																																
Staff Initials																																
Time																																
Day of Month	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31																
°C Temp	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm
>11																																
10																																
9																																
8																																
7																																
6																																
5																																
4																																
3																																
2																																
1																																
0																																
≤-1																																
FREEZER																																
>-12																																
-13																																
-14																																
-15																																
-16																																
-17																																
-18																																
-19																																
<-20																																

**Instructions:** Place and "X" in the box that corresponds with temperature. The gray zones represent unacceptable temperature ranges. If the temperature is recorded in the gray zone:

1. **Store the vaccine** under proper conditions as quickly as possible
2. **Call the immunization program** at (502) 564-4478 for further assistance.
3. **Document the action** taken on the reverse side of this log